

ſi	ill in this in	formation to ide	ntify your case	:		one box only as directed in	this
C	Debtor 1	Lynn	Α	Marmo	Edst of the state	nd in Form 122A-1Supp:	
		First Name	Middle Name	Last Name	1. Ther	re is no presumption of abuse.	
(:	Debtor 2 Spouse, if filing		Middle Name	Last Name	of ab	calculation to determine if a presump ouse applies will be made under Cha ns Test Calculation (Official Form 12	pter 7
L	Jnited States Ba	ankruptcy Court for th	ne: MIDDLE DIST.	OF PENNSYLVANIA		Means Test does not apply now beca	
1	Case number if known)	18-03694				ualified military service but it could ap	
					☐ Checl	k if this is an amended filing	
0	<u>fficial Forn</u>	n 122A-1					
C	hapter 7 S	Statement of \	Your Current	Monthly Income			12/15
accinfi are mil 12:	curate. If more ormation appli e exempted fro litary service, 2A-1Supp) with	e space is needed, a ies. On the top of a om a presumption of complete and file St h this form.	attach a separate si ny additional pages f abuse because yo tatement of Exempt	ou do not have primarily cor tion from Presumption of Al	ne line number e number (if kn nsumer debts o	r to which the additional nown). If you believe that you or because of qualifying	
	Part 1: Ca	alculate Your Cu	rrent Monthly II	ncome			
1.	What is you	r marital and filing s	tatus? Check one of	only.			
	✓ Not ma	rried. Fill out Column	n A, lines 2-11.				
	☐ Married	l and your spouse is	filing with you. Fi	ill out both Columns A and B,	lines 2-11.		
	Married	l and your spouse is	NOT filing with yo	ou. You and your spouse ar	e:		
	Liv	ving in the same hou	sehold and are no	t legally separated. Fill out b	oth Columns A	and B, lines 2-11.	
	ded	clare under penalty of	f perjury that you and	d your spouse are legally sep	arated under n	t Column B. By checking this box, you onbankruptcy law that applies or that t requirements. 11 U.S.C. § 707(b)(7)	you
	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.						
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.		wages, salary, tips, yroll deductions).	bonuses, overtime,	, and commissions	\$3,137.0	00	
3.	Alimony and if Column B is		nents. Do not includ	de payments from a spouse	\$780.0		
4.	expenses of regular contri your depende	butions from an unm ents, parents, and roo	dents, including chi arried partner, meml ommates. Include re	paid for household ild support. Include bers of your household, egular contributions from ide payments you listed	\$0.0	00	

Column A Debtor 1

Column B Debtor 2 or non-filing spouse

Net income from operating a business, profession, or farm

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00				
Ordinary and necessary operating expenses	\$0.00	_	Conv		
Net monthly income from a business profession, or farm	,\$0.00		Copy here →	\$0.00	

Net income from rental and other real property

	Debtor 1	Debtor 2		
Gross receipts (before all deductions)	\$0.00	•		
Ordinary and necessary operating expenses	\$0.00		Сору	
Net monthly income from rental or other real property	\$0.00		here 👈	\$0.00

Interest, dividends, and royalties Unemployment compensation

\$0.00

\$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you	\$0.00
For your spouse	

Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$0.00

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a senarate page and put the total below

solven are based and based are	

Total amounts from separate pages, if any.

Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.



Official Form 122A-1

Debtor 1		Lynn A Marmo		Case number (if known) 18-03694				
Р	art 2:	Determine Whether the Means T						
12.	12. Calculate your current monthly income for the year. Follow these steps:							
	12a.	Copy your total current monthly income from	Copy line 11 here 🔰 12a. \$3,917.00					
	Multiply by 12 (the number of months in a year).			X 12				
	12b.	The result is your annual income for this part	of the form.	12b. \$47,004.00				
13.	Calcu	late the median family income that applies	to you. Follow these steps:					
	Fill in	the state in which you live.	Pennsylvania					
	Fill in	the number of people in your household.	3					
	Fill in the median family income for your state and size of household							
	To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.							
14.	How	do the lines compare?						
	Line 12b is less than or equal to line 13. On the top of page 1, check box 1, <i>There is no presumption of abuse</i> . Go to Part 3.							
	14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2</i> . Go to Part 3 and fill out Form 122A-2.							
P	Part 3: Sign Below							
By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.								
	X Lynn A-Marmo, Debtor 1 X Signature of Debtor 2							
		Date 05/03/2019 MM / DD / YYYY	MM / DD / YYYY					
	If vo	u checked line 14a. do NOT fill out or file Forn						

If you checked line 14b, fill out Form 122A-2 and file it with this form.